FORM D

SEC 1972 (6-02)

NOV 1 5 2004

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

POTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Num	ber:	3235-0076					
Expires:	Ma	y 31, 2005					
Estimated	average l	burden					
hours per r	esponse	16.00					

SEC USE ONLY					
Prefix	Serial				
DAT	E RECEIVED				

1 of 9

Name of Offering (check if this is an amendment and name has changed, and indicate change.)		
March 2004 Convertible Term Note and Warrant Financing		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE	
Type of Filing:	-	(\$1) (\$1)\$ (\$1\$) \$1(\$) \$100 pres 1100 pres 1100
A. BASIC IDENTIFICATION DATA		
Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)		04049951
AXESSTEL, INC.		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (I	Including Area Code)
6815 Flanders Drive, Suite 210, San Diego, CA 92121	858-625-2100	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number ((Including Area Code)
Brief Description of Business		
Develop, design and market fixed wireless voice and data products for the worldwide teleco	mmunications market	
Type of Business Organization		
	olease specify):	OCESSED
business trust limited partnership, to be formed		
Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 9 6	mated N	OV 1 6 2004 =
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	»: پــ	L
CN for Canada; FN for other foreign jurisdiction)		MONSON -
GENERAL INSTRUCTIONS	J.	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 2	30.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed file elow or, if received at the	d with the U.S. Securities at address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies no	t manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.		
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	Securities Administrator or the exemption, a fee in	r in each state where sales n the proper amount shall
ATTENTION		
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unlifiling of a federal notice.		
Persons who respond to the collection of information contained	in this form are not	

required to respond unless the form displays a currently valid OMB control number.

		A. BASIÇ ÎDE	NTIFICATION DATA		
2. Enter the information re	equested for the fol	llowing:			
•		suer has been organized w			
 Each beneficial ow 	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issue
 Each executive off 	ficer and director o	f corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
 Each general and r 	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i BHAGAT, Jai	if individual)				
Business or Residence Addre 6815 Flanders Drive, Su		Street, City, State, Zip Cogo, CA 92121	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, CHENG, Lixin	if individual)				
Business or Residence Addre	,	· · · · · · · · · · · · · · · · · · ·	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, YUKIE, Satoru	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
6815 Flanders Drive, Sui	te 210, San Dieg	go, CA 92121			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
GRAY, Patrick					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
6815 Flanders Drive, Su	ite 210, San Die	go, CA 92121			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, CHOUGH, John (Hong					
Business or Residence Addres 6815 Flanders Drive, Su			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, KIM, Jin Yong (Jason)	if individual)				
Business or Residence Addres 6815 Flanders Drive, Su			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, KWON, Mike HP	if individual)				
Business or Residence Addres 6815 Flanders Drive, Su			ode)		
	(Use bla	ank sheet, or copy and use	additional copies of this s	sheet, as necessary	v)
			2 of 9		

			A. BASIC ID	ENTII	FICATION DATA				
2. Enter the information re	equested for the fo	llowing:							
• Each promoter of	the issuer, if the is	suer has b	een organized v	vithin 1	the past five years;				
 Each beneficial ow 	ner having the pow	er to vote	or dispose, or di	irect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issu
• Each executive off	ficer and director o	f corporat	e issuers and of	corpo	rate general and man	naging	partners of	partne	rship issuers; and
 Each general and i 	managing partner o	f partners	hip issuers.						
Check Box(es) that Apply:	Promoter	□ Be	neficial Owner		Executive Officer	7	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
YANG, Seung Taik	ir marviadar)								
Business or Residence Addre 6815 Flanders Drive, Su	*		ty, State, Zip C 12121	ode)			- · · · <u>- · · · · · · · · · · · · · · ·</u>		
Check Box(es) that Apply:	Promoter	□ Ве	neficial Owner		Executive Officer (Former)	Z	Director		General and/or Managing Partner
Full Name (Last name first, LEE, Kwang Ho (Kenny)									
Business or Residence Addre			-	ode)	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply:	Promoter		neficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i MORASH, David	f individual)								
Business or Residence Addre	ss (Number and	Street, Ci	ty, State, Zip C	ode)					
6815 Flanders Drive, Suit	te 210, San Dieg	o, CA 9	2121						
Check Box(es) that Apply:	Promoter	☑ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
NIKKO ANTFACTORY									
Business or Residence Addre				ode)					
Check Box(es) that Apply:	Promoter	✓ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i					4111141				
Business or Residence Addre 6815 Flanders Drive, Sui	-			ode)					
Check Box(es) that Apply:	Promoter	☐ Be	neficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i HAGOPIAN, Craig	f individual)					<u></u>		*****	
Business or Residence Addre 6815 Flanders Drive, Su	=	-	ty, State, Zip C 2121	ode)					
Check Box(es) that Apply:	Promoter	☐ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street, Ci	ty, State, Zip C	ode)					
	(Use blan	nk sheet,	or copy and use	additi	onal copies of this s	heet,	as necessary	/)	
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For each party listed, positions are stated as of the date of financing.

					. B. I	VFORMATI	ON ABOU	T OFFERI	VG				
,	T7 - 4b -	ianuan aald	l am daga th	a ioguar ir	stand to gal	II to non o	ooraditad i	nvectore in	this offeri	n a?		Yes	No
1.	Has the	issuer soid	l, or does th			Appendix,				_	******************		X
2	Whatia	tha minim	um invector					-				s N/A	
2.	What is the minimum investment that will be accepted from any individual?								Yes	No.			
3.			permit join									R	
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only.									e e			
			first, if indi	ividual)									
		Dital Partne	Address (N	lumber and	Street Ci	ty State 7	in Code)						
			st, Suite 19				ip code;						
			oker or De		<u> </u>							-	
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)	• • • • • • • • • • • • • • • • • • • •			••••••			. 🗌 All	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)					·	
-		· I.D.	oker or De										
Na	me of As	sociated Bi	oker of De	aler									
Sta	tes in Wi	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)							. 🔲 Al	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	<u></u>					
Na	me of As	sociated Bi	roker or De	aler									
Sto	tes in W/I	nich Person	Listed Ha	Solicited	or Intende	to Solicit	Purchasers					-	· · · · · · · · · · · · · · · · · · ·
510			s" or check									Al	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	\$		\$
	Equity	\$502,250	00.0	\$_0.00
	Common Preferred			
	Convertible Securities (including warrants) Note convertible into common stock	\$_3,000,000	00	\$3,000,000.00
	Partnership Interests	\$		\$
	Other (Specify warrants	§ Included al	νος	e \$ Included above
	Total	\$ 3,502,250.	00	\$ 3,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		T	•
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Agracata
		Number		Aggregate Dollar Amount
		Investors		of Purchases
	Accredited Investors	2	+	\$_3,150,000.00
	Non-accredited Investors		+	\$_0.00
	Total (for filings under Rule 504 only)	1	+	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		+	\$
	Regulation A		+	\$
	Rule 504		+	\$
	Total		+	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		\Box	\$
	Legal Fees			\$_39,500.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately) finder's fee warrants @\$150k value \$ 172.5	ik cash		§ 322,500.00
	Other Expenses (identify) escrow and management fees		Б	\$ 109,000.00
	Total			\$ 471,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRIC	e number of investors, expenses and u	SE OPPROCEEDS :	
and total expenses furnished in response to F	eate offering price given in response to Part C — Queart C — Queart C — Question 4.a. This difference is the "adjust	ed gross	3,031,250.00
each of the purposes shown. If the amou	gross proceed to the issuer used or proposed to be not for any purpose is not known, furnish an estime total of the payments listed must equal the adjusted to Part C — Question 4.b above.	ate and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
			s
Purchase of real estate			\$
Purchase, rental or leasing and installationand equipment	n of machinery	\ \$	\$
· ·	and facilities		S
Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)			
			195,000.00
			2,836,250.00
-			s
			\$_3,031,250.00
Total Payments Listed (column totals add	ed)	\$_3,	031,250.00
	D. FEDERAL SIGNATURE		
signature constitutes an undertaking by the issu	ed by the undersigned duly authorized person. If the ler to furnish to the U.S. Securities and Exchange non-accredited investor pursuant to paragraph (b	Commission, upon writte	le 505, the following n request of its staff,
Issuer (Print or Type)	Signature	Date	
AXESSTEL, INC.	12	11/11/04	
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Helen Chao	General Counsel and Secretary		
		1	
	ATTENTION —		